_	 		RCE						291	182	72'	70	
_	5.06	CLAIMS A	S FILED (Colum		-	mn 2)	SMAL TYPE		YTITY	OR			THAN
TOTAL CLAIMS							RA	TE	FEE]	RA	TE	FEE
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TOTAL CHARGEABLE CLAIMS			19 minus 20		•	.6	X\$	=		OR	X\$	=	.,,,
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IL	ILTIPLE DEPEN	NDENT CLAIM P	RESENT							OR	<u> </u>		1
N	10.1-12.5.	05)			-		L.	=		OR	+	=	1
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1	121/06°	LAIMS AS A (Column 1)	MENDE	(Colur	mn 2)	(Column 3)	SMA	LL I	ENTITY	OR			THAN
		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA [*]	ΓE	ADDI- TIONAL FEE		FIA.	ΓE	ADD TION FEE
	Ţotal	• //	Minus	100)	= (7)	X\$	=		OR	X\$	=	
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				5. LO 1571 - 1771 - NO	1 171 / 11 /		1			1	├		
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